

BARUCH (S.)

al

PRACTICAL DATA ON THE
APPLICATION OF WATER IN SOME
INTRACTABLE DISEASES.

BY

SIMON BARUCH, M.D.,

Attending Physician to the Manhattan General Hospital and New York Juvenile Asylum; Consulting
Physician to the Montefiore Home for Chronic Invalids.

[READ BEFORE THE NEW YORK COUNTY MEDICAL SOCIETY.]

presented by the author.

COMPLIMENTS OF THE AUTHOR.

S. G. Library



NEW YORK:

PRESS OF STETTINER, LAMBERT & Co.,

22, 24 & 26 READE STREET.

1893.

From: J. Balneol. & Diet, N.Y., 1893, VII.

PRACTICAL DATA ON THE APPLICATION OF WATER IN SOME INTRACTABLE DISEASES.

THE recent revival of hydrotherapy is an interesting phase of therapeutics in this country. Three years ago the first paper, giving a general review of the uses of water, external and internal, by lavage, irrigation, baths, etc., was read before this society. Therefore the history of this subject is closely bound up with the history of this society. Articles on this same subject have now become numerous. A new journal has appeared on balneology, and a department in that magnificent specimen of American journalism, the *Annual of the Universal Medical Sciences*, chronicles the advances in this therapeutic specialty. Indeed, a recent letter from Dr. Winternitz, professor of hydrotherapy in the University of Vienna, refers to the fact that more is now done in this country for hydrotherapy than in Germany, its birthplace. For this reason I venture to offer you some practical remarks on this subject.

The chief, though not the only, aim of hydrotherapy is to stimulate or give tone to the nerve centres. Since all vital energy emanates from the latter, since the proper performance of all the organic functions depends upon their activity, it is fair to deduce important therapeutic results from an agency which influences it so potently. The main question is, does the application of water to the cutaneous surface stimulate the nerve centres? That this is a trite physiological fact is daily observed in the

effect of a dash of cold water in reviving a person under syncope. Here we have a brief shock to the sensory peripheral nerves, followed by reaction whose effect is transmitted to the central nervous system, and thence to the respiration, deepening it and the circulation, restoring the failing pulse; thus the temporarily dormant vital powers receive a stimulus whose appreciation must convince the most sceptical by its very simplicity.

At this time I do not propose to dwell upon the various modifications which change in temperature of the water applied to the cutaneous surface may produce, nor the remarkable difference of effect resulting from the increase of the pressure under which it strikes the skin, nor the valuable results of changes in the duration of the procedure.¹ Suffice it to say that we have in the external use of water a therapeutic agent so flexible that it may be adapted to the most varying types and forms of disease. The following brief outlines of cases are presented in order to enable you to obtain a view of the practical application of hydrotherapy in some intractable chronic diseases, to demonstrate its flexibility, and to point out the methods of adapting it to varying conditions.

CASE I.—INTENSE CHLOROSIS.

Miss H., age 20, ill two years, under constant treatment by gynæcologists

¹ See "The Uses of Water in Modern Medicine,"
By Simon Baruch, M.D. Detroit: Geo. S. Davis.



in Harrisburg, Baltimore, and Philadelphia, was brought as a last resort to Dr. T. G. Thomas, to be placed in his sanitarium. Dr. Thomas discovered no uterine trouble and referred her on June 8th, 1892, for hydriatic treatment, with a diagnosis of chlorosis of aggravated type. Local and medicinal and institution treatment, iron, arsenic, diet, and massage and change of air, had been tried in vain. Although the patient was plump, a more pallid creature could not be imagined. Appetite was poor, bowels irregular, her sleep was disturbed, and she was subject to frequent (hysterical) fainting spells. The slightest exertion produced difficult breathing and rapid heart action. Menstrual flow was regular, but scant and very pale. Blood examined by Fleischl's hæmometer registered thirty-one per cent.

June 10th: Preparatory treatment by hot-air baths and spray douche, to educate the patient's reactive capacity, was ordered. Fainting in the hot-air bath, she was removed. A spray douche of two seconds at 64°, with twenty pounds pressure, was rapidly passed over her in a sitting posture. She again fainted. Friction produced no reaction.

On the following day, a milder course was pursued. She was gently wrapped in a long-haired woollen blanket for forty-five minutes. Parts of the body were then successively uncovered and splashed with water at 60°, thrown with some force from the hollow hand of the attendant. This was followed by friction, and continued until the whole body had received the ablution and friction. The same treatment was continued on the 11th and 12th, when she fainted twice. This was repeated without fainting until the 16th of June. She was again placed in a hot-air bath (167°), with a cold compress around the head, and given frequent sips of ice water. The head not

being subjected to the heat, the patient was enabled to breathe the cool air which permeated the room. When the cutaneous vessels became tinged she was seated in a tub containing eighteen inches of water at 100°, thoroughly rubbed for three minutes. This was followed by an ablution at 60°, good friction-drying, and general massage for fifteen minutes. She fainted twice during these procedures.

July 8th: The last treatment had been continued, reducing temperature of the spray douche daily one degree; to-day she had an air bath (160° F.), followed by spray douche under thirty pounds pressure for five seconds, beginning at 80° and rapidly reduced to 50°, followed by fifteen minutes' general massage. She reacted well and felt comfortable.

July 14th: Same treatment has been continued. To-day she had a hot-air bath (175°), followed by rain bath, thirty seconds, at 94° reduced to 69°, then spray douche, ten seconds, 79° to 54°, and general massage. Reaction good.

July 30th: This treatment has been continued, until to-day she took a jet douche at 45° without flinching. Being absent in Long Branch, I wired to Dr. F. Armstrong to examine her for me. Dr. A. reports: Miss H. looks quite well, eats and sleeps well, and is certainly improved since I last saw her. The comparison test indicates about one hundred per cent hæmoglobin.

August 1st: Miss H. left for her home in Pennsylvania. This case certainly illustrates, first, the effect of the douche in improving the nutrition; second, that hæmatosis may be enhanced by the stimulus conveyed from the periphery to the nerve centres, and thus reflected upon the blood-making functions, as has been well shown by Winternitz, Thermes, and others; third, that the most feebly reacting patient may, by

perseverance and proper adaptation of the hydriatic procedures, become accustomed to this treatment. The danger of shock from cold water is proven to be chimerical by this case.

If this fragile and sensitive young woman could be accustomed to the douche by beginning with mild procedures, no chronic case that is not *in extremis* could fail to respond to it.

CASE II.—NERVOUS DYSPEPSIA;
ANÆMIA.

Mrs. O., age 28, resident of Florida, consulted me, May 5th, 1892, for "catarrh of the stomach," because of agonizing pains after meals. She has been living on mush and milk, and has had medical treatment for several years, with diminution but not disappearance of the pains. She is emaciated; her voice is feeble; she is depressed and hopeless. Her wan face and prematurely old appearance bear evidence of a life of constant physical suffering. There is not a particle of the hysteric element in this case. Ordered at 12:30 P.M. a full test meal at Delmonico's, which she reluctantly accepted because of dreaded increase of pain. Returning to my office at 5:30, the stomach was washed out without difficulty, Mrs. O. displaying marked patience. To her great surprise, my prediction that her dinner would be digested was verified, a little tomato peeling being the only remnant visible.

The diagnosis of a gastric neurosis being thus confirmed, she was ordered a mixed diet, chiefly consisting of hot milk and stale bread and hominy for breakfast, adding eggs (soft-boiled later), same with fish or oysters for luncheon, and steamed rice and roast beef for dinner. Desserts and salads forbidden.

The general invigoration of the entire system being the chief element in this case, she was at once

placed upon daily hydriatic measures, as follows:

May 6th: Hot-air bath at 169° for six minutes filled the cutaneous vessels of her pallid skin and produced free perspiration. This was followed by a tub bath of water at 98° for five minutes, and a rain bath of 95° reduced to 90°, for half a minute, at twenty pounds pressure, for the purpose of increasing cutaneous action. A tonic procedure by the spray douche at 80° for five seconds, with friction, closed the first treatment and resulted in good reaction.

On the following day she remained in a hot-air bath at 164° only long enough to render the cutaneous vessels turgid, to promote reaction from the rain bath for thirty seconds at 90° reduced to 80°, and a spray douche at 70°. Reaction very fair.

May 11th: Temperature of rain bath was reduced to 75°, and a jet douche at 65° was added. Reaction good.

May 23d: Same treatment, with jet douche to back at 60°.

May 25th: Complained of sciatic pains on right side. The Scotch douche was applied to the gluteal region for thirty seconds, followed by jet douche of one second at 59°.

May 31st: On account of menstruation, treatment has been omitted for six days. Sciatic pain is relieved. Treatment of May 11th resumed.

June 2d: Temperature of rain bath reduced to 70°, and of jet douche to 57°.

June 12th: Same treatment, except jet douche lowered daily one degree, reaching to 48°. Patient has been steadily improving in flesh and spirits, being free from pain until today. The addition of cauliflower to her diet reproduced pains. Stomach was now washed out and some mucus found in it.

Temperature of jet douche was raised to 60°, as patient was excited by it.

June 18th: Jet douche suspended; hot-air bath, 180°, followed for forty seconds by rain bath of 75° reduced to 65°; stomach washed out again.

June 20th: Pain returning, the constant current, 12 milampères, was applied by a large flat sponge electrode over epigastric and a small one over lumbar region.

June 27th: Temperature of baths, having been higher, was now reduced, patient being again depressed; the jet douche was given at 50° for three seconds. Reaction good.

July 9th: Electricity having been unavailing and fermenting material being found in the stomach, the Scotch douche has been applied to epigastric region for thirty seconds after the rain bath, 70° to 45°, daily, and followed by jet douche at 50° for three seconds. Patient now feels sufficiently restored to go to Buffalo to her parents.

Under date of November 26th, 1892, she writes that she has gained fifteen pounds in weight and is much stronger; has continued the diet prescribed, because, like most of these neurotics, she "feared her stomach was not equal to much of a change." Most of the time she is entirely free from pain; she has slight distress every now and then, but expresses the warmest gratitude for the help given.

This case is similar in many respects to the case of Dr. H. reported in "The Uses of Water," page 85, volume I., and demonstrates the value of hydrotherapy in improving the nutrition and thus furnishing better blood to the stomach nerves, which are calling for it through pain.

CASE III.—DIABETES AND OBESITY.

On March 2d, 1892, I was consulted by Mrs. S., wife of a prominent police official, age 63. She had been suffering from lassitude, loss of appetite, depression of spirits for several months; had been relieved of mus-

cular rheumatism by wet packs and massage a year ago.

Examination revealed six per cent sugar by fermentation test. Specific gravity 1.040; quantity passed in twenty-four hours, eighty-one ounces. She was languid and indisposed to exercise, weighing without clothing two hundred and fifty-three and a quarter pounds on the 21st of March. An antidiabetic diet was ordered and systematic walking exercise. The former was rigidly adhered to for four weeks without effect; the latter could not be accomplished because walking two blocks "put her out of breath" and exhausted her. Acting upon the well-known physiological fact that next to the liver the skeletal muscles hold most glycogen, and that sugar is by exercise of these muscles best utilized for the benefit of the organism, I regard systematic exercise of quite as much importance as diet. I have the record of six cases in which these two combined entirely and permanently removed the sugar from the urine. A strict diet having failed in this case, it was important that some therapeutic method be adopted to enhance the patient's capacity for muscular exercise. It was determined to reduce her weight and invigorate the nervous system by a carefully regulated hot-air bath until free perspiration ensued, once a week, followed by the spray douche at 90° for a half-minute, and at 80° for ten seconds. This was succeeded by active massage. Five times a week she received a tonic hydriatic procedure, beginning on the 28th of March with the dry pack for a half-hour to fill the cutaneous vessels, followed by a general ablution at 70° and good friction. Patient attended daily, coming from her home in West 152d street in a carriage, as she was unable to walk. On April 15th she had lost six pounds and felt able to walk six blocks twice a day.

April 22d : Urine showed specific gravity 1.035 ; sugar five and a quarter per cent. Wet packs forty-five minutes, sheet wrung out of water at 50°, were ordered, followed by half-bath ten minutes at 85°; sponge ablu-tion on back at 70° with active friction in tub ; massage fifteen minutes. The object of this treatment was to in-crease tissue change and improve the circulation in the muscular tissues. This was continued until June 6th, the jet douche at 75° being added as a tonic and for contracting the mus-cles. The result of these procedures was ability to walk more every day until she was not fatigued by four miles per diem. The diet being rig-idly adhered to, a rapid decrease of sugar was evident every week from the date of the first half-mile walks.

Since July 1st she has been entirely free from sugar until the present time, frequent analysis having been made until December 1st, 1892.

In this case the diet alone, pursued for four weeks, made no impression ; but as soon as the patient was able to oxidize her sugar by means of mus-cular exercise improvement became pronounced. No medicinal agent could have accomplished this change in the nervous, muscular, and vascu-lar structures in so brief a time, if at all. Of this I am convinced by other cases similarly treated.

CASE IV.—DIABETES INFLUENCED BY DIET AND HYDROTHERAPY.

Mrs. Du B., age 65, applied for treatment for a severe herpes zoster on the left part of the back, below the scapula. On the evening of April 4th, 1890, I was hastily sum-moned, after I had treated her herpes on the preceding afternoon. She was absolutely comatose, without any re-flexes, etc. Drawing some urine by catheter, I found no albumin, but decided evidence of sugar, this being its first discovery. Toward morning she became conscious spontaneously,

and began to improve. On the fol-lowing evening she was seen in con-sultation by Dr. A. L. Loomis. She continued under treatment, chiefly dietetic, and codeia and constant cur-rent for severe neuralgic pain at for-mer seat of herpes. Sugar has been almost constantly present in small quantities—one-half to one per cent. During the winter of 1892-93 she de-cided to undertake a thorough course of hydrotherapy, encouraged by the patient whose history is given above and who lives near her. The same treatment had not the slightest effect on the urinary sugar. But she re-garded herself as so much invigorated and capacitated for more work and exercise that she voluntarily takes the treatment twice a week as a tonic agent.

CASE V.—SEXUAL HYPOCHONDRIASIS.

Mr. M., age 47, was referred on June 5th, 1892, to the Institute by Dr. S. Weir Mitchell, of Philadelphia, with the following history (here ab-breviated) : Patient complains of im-potence and a sensation of water trickling down front of thighs. Hab-its good. Had three children, all dead ; two died at birth. Three years ago, when his wife was absent, he first discovered the trickling sen-sation. On her return he found sex-ual desire present, but was incapable; emission occurred, and still occurs, in sleep. Had two strictures cut without relief. After being in the mountains a year ago he had two successful connections, and again in November, 1891 ; none since ; fre-quent emissions and firmer erections during sleep. These are rare now. Present state : Stout man, abdominal paunch ; urogenitals normal ; cremas-ter reflex absent ; paræsthesia along anterior crural nerve. Electrical ex-amination negative. Sleeps well. Appetite good. No sperm in urine.

Dr. De Schweinitz pronounced eyes normal. Dr. Mitchell regarded pa-

tient as suffering from some slight but distinct trouble of the lumbar or dorso-lumbar cord; dread of sexual failure is probably emotional; full recovery of power is probably not to be looked for; advises electricity (detailed), also douches—alternating warm and cold—to spinal column. Treatment at Institute, June 5th. The patient's peripheral circulation being feeble, skin flabby and inelastic, pulse compressible, and a general aspect of mental and physical depression being present, it was thought advisable to give him tonic treatment as follows: A hot-air bath (170°) for twelve minutes having warmed him up, a rain bath of 100° , reduced to 80° during forty-five seconds, was given under thirty pounds pressure, and followed by the jet douche at 70° for two seconds under fifteen pounds pressure. General massage was given for fifteen minutes. Reaction was poor.

June 6th: Hot-air bath (178°) ten minutes. Rain bath, 95° , reduced to 70° during one minute, was followed by Scotch douche (alternating hot and cold stream) to spine. Reaction poor.

June 11th: Same treatment was continued, reducing temperature of douche daily one or two degrees and increasing pressure. Reaction is now good and patient looks brighter. The perineal douche (jet) of 60° , for one minute, is now added for psychic effect.

June 12th: Patient dissatisfied; does not think he "can improve by having a little cold water sprinkled on him," and insists upon more active measures.

June 16th: The psychrophore of Winternitz (a small rubber or skin bladder secured to a double-current straight rectal tube attached to an irrigator) is applied for five minutes, with water flowing at 45° .

June 19th: Patient looks brighter, but insists that, without having any

test, his sexual power has not improved. He leaves for Chicago tomorrow, and tells me that without my knowledge he had been under local treatment by Dr. E. L. Keyes while he was under my care.

Two other cases of sexual hypochondriasis, of a milder form and in younger men, were successfully overcome by the treatment here outlined.

CASE VI.—SEXUAL NEURASTHENIA IN A MAN OF 25.

In this case the tonic treatment by hot-air baths, followed by rain baths and jet douche to spine, gradually lowered to 45° , was positively efficient in establishing a satisfactory condition. This gentleman applied for treatment for general debility. He was not a sexual hypochondriac, because he incidentally mentioned that he had been married six weeks and did not experience the feelings that he had anticipated from sexual congress, to which he had been an entire stranger before marriage.

After two months' treatment he volunteered the statement that he was entirely satisfied with the result.

CASE VII.—ANGINA PECTORIS.

Mr. D., merchant, age 40, of robust appearance, gives a history (September 24th, 1892) of having suffered for several months from agonizing pains in the præcordial region whenever he attempted to exercise much. He was disabled from business and much depressed. Dr. Janeway, in consultation with Dr. Keune, his attendant, diagnosed angina pectoris. Another consultant diagnosed aneurism of aorta. Rest was advised and the usual treatment.

Mr. D. presenting a decidedly gouty diathesis, with high arterial tension, urine loaded with lithates, he was put upon a non-meat diet, glonoin and strychnine, etc. A wet pack for an hour was given every

morning, water at 60°, followed by rapid ablution at 50° and friction. A wet compress was worn all day around left half of chest, renewed hourly in water at 60°. He almost invariably slept in the pack. After three months' treatment, during which the frequency and intensity of attacks diminished rapidly, never at any time reaching their previous character, he was allowed to take a trip to Chicago. On his return he was put on chopped beef, preceded by hot water, for breakfast and dinner, oysters and hot milk for luncheon. Compresses were discontinued; wet packs continued daily, followed by an affusion with water at 70°. January 21st, 1893, he reports himself as quite free from all pain; losing some flesh, but feeling well, although he has done more work than ever before in his life. He has passed satisfactorily through the ordeal of seeing his large factory burned down and through the excitement and labor of reconstructing it in another locality. The soothing effect of the wet pack and its effect in promoting tissue change are well exemplified in this case.

CASE VIII.—INCIPIENT PHTHISIS.

Mr. S., from Kentucky, age 26, merchant, consulted me at Long Branch on July 29th, 1892. Looks pale, emaciated; states that he has been losing flesh and coughing seven months; is constipated, has no appetite. Caught cold during a fire. No hereditary element. Temperature, 101°; pulse, 120°. Physical signs: Percussion over left supraclavicular space dull, respiratory murmur in left apex harsh, expiration prolonged. Ordered calomel, six grains, and absolute rest.

July 31st: Feels better. Temperature, 99° F. Ordered to go to Institute for treatment. Here he was weighed (nude)—one hundred and six and one-half pounds—and re-

ceived a hot-air bath until warm, to enhance his reactive powers. This was followed by a rain bath of 95° F., reduced gradually to 80°, for forty seconds under ten pounds pressure, gradually increased; then spray douche at fifteen pounds pressure, gradually increased to thirty pounds for four seconds at 70°.

This was repeated daily. He reported again at Long Branch ten days later looking better, appetite improved, and with a gain of one and one-half pounds. He says a friend having advised him to have his sputum examined, the latter was found to contain bacilli. He was urged to see Dr. E. G. Janeway, who, after prolonged examination, pronounced him phthisical, advised him to leave the city at once, and ordered him to take creosote. As he was improving under hydrotherapy, I regarded his departure with disfavor and advised continuance.

September 8th: The hot-air bath, followed by rain bath 80° to 70°, and spray douche 70° to 40°, has been continued, until to-day patient weighs one hundred and fourteen pounds, a gain of seven and one-half pounds in five weeks. Appetite is excellent: cough still troublesome; is very hoarse. Temperature, 101°. Ben-zoin inhalation and one-fourth grain codeia every four hours improved cough in two days, during which time hydriatic treatment had been discontinued. It was now resumed.

September 12th: Temperature is 99°; cough reduced to a minimum; appetite excellent. Weight, one hundred and thirteen and one-half pounds. Has been taking six drops creosote t. i. d., which sickens him and is discontinued. Ordered maltine with peptones, t. i. d., in milk.

September 19th: Hot-air bath (170°) three minutes. Rain bath, 80° reduced to 64°, one minute, from which he reacted well. Cough troublesome. A spirometer test shows

190° before and 260° after treatment, which is 20° above the average for his height.

September 20th : Dr. J. S. Ely reports tubercle bacilli in small numbers.

December 30th : With occasional interruptions and loss of weight, patient has progressed well, and to-day weighs one hundred and twenty-one and a half pounds, looks well, coughs but little, no temperature, and is anxious to go home. Dr. Freudenthal, who treats his throat, writes under date of January 12th, 1893, after detailing from his case records the physical signs he found on July 27th and again on November 11th, 1892 : " Patient looks and feels much better, and has gained ten pounds in weight. Ulcerations of the ligamentum glossepiglotticum and of the vocal cords have healed under lactic acid and menthol oil (twenty per cent). Although I am not as optimistic as you are regarding water treatment, I must acknowledge that the improvement in the case is remarkable."

January 21st : Patient is now almost free from cough and has good appetite. Weighs one hundred and twenty-two and a half pounds (a gain of sixteen pounds, and five pounds more than he ever weighed in health). Dr. Van Gieson reports that *no tubercle bacilli could be found* after examining several slides.

Remarks.—There having been no change made in the patient's diet, mode of life, and treatment, this case is a clear illustration of the utility of a judicious hydrotherapy in improving nutrition in cases that usually thwart us. Clinical evidence of its value in phthisis is accumulating so rapidly that I need only refer here to a few of the cases I reported to the State Medical Society last February. One of these, age 33, of one and a half years' duration, beginning with pulmonary hæmor-

rhage, gained twenty-six pounds in three months, and coughed so little that no specimen of sputum could be furnished. Another, 36 years old, ill two and a half years, beginning with hæmorrhages, gained twenty-one pounds and lost all bacilli from sputum, and returned to work. Another, age 31, ill one year, with repeated hæmorrhage, night sweats, etc., was discharged, after one year's treatment, with twenty pounds gain of weight, without bacilli, slight physical signs, and able to go to work (Transactions New York State Medical Society, 1892, page 382). Such stubborn facts should make us pause ere we condemn these sufferers to exile from home. A more methodical management, as indicated in the above quoted essay, offers a reasonable prospect of success for home treatment. Witness the case of H. B. (page 383), who, after emigrating to Minnesota and improving there for six years, came to this city with a cavity and in the most desperate general condition, and was sent home so much improved that he was able to attend to business.

Clinical proof abounds that phthisis offers, next to nervous diseases, the most fruitful field for hydrotherapy.

CASE IX.—ADVANCED BRIGHT'S DISEASE ; REMARKABLE RESULTS FROM THE HOT-BLANKET PACK.

Mr. A., age 60, a foreman in a lead trap factory, came under my care, by request of his benevolent employer, on the 4th of May, 1891. I had attended him several years ago for lead colic and severe headaches, from which he recovered. I now found pronounced swelling of feet and ankles, breathlessness on exertion, morning nausea, headache, double vision, and vertigo. Urine showed a large proportion of albumin, abund-

ance of hyaline casts ; specific gravity, 1.020.

Patient received ten grains of calomel, was put on bitartrate of potassium lemonade, and was ordered one minim of one-per-cent solution glonoin every three hours until flushed. He also received hot-blanket packs of one hour morning and evening. The quantity of urine having been reduced to twenty-two ounces, the treatment continued active until May 28th. Dr. Edward S. Peck examined his vision to-day, and diagnosed homonymous diplopia, amblyopia, and albuminuric retinitis. Dr. Peck examined urine on the 29th, and found it to "contain albumin in large reduction." There being some improvement in the symptoms, the same medicinal and dietetic treatment was continued.

The hot-blanket packs were now given once a day. They were, like the first, always given by means of a blanket, thoroughly wrung out of hot water, laid upon another blanket. Patient was snugly tucked into the hot blanket and afterward covered by the other blanket. He remained in this one hour or more until he perspired very freely. Successive parts of the body were now gradually uncovered and thoroughly dried. General friction closed the procedure.

June 30th : Examination of urine, made from time to time, revealed gradual improvement in quantity and constituents. He went to the country on the 1st of July, 1891. On September 9th he called at my office. His urine presented but a trace of albumin. He was free from all unpleasant symptoms, was strong, and had resumed his duties at the factory for the past week.

October 4th : I could find no trace of albumin or casts in his urine.

He worked without interruption during the entire winter, until August, 1892, when he was obliged to

discontinue by a severe diarrhoea, for which I was not called. He went to Hackensack, N. J., and was there attacked on the 16th of August by apoplexy and hemiplegia, from which he died after remaining unconscious six days.

Dr. St. John, his attendant, states that prior to this illness he had examined the urine, finding no casts and but a small percentage of albumin. There was no œdema.

This case illustrates the value of the hot pack in restoring the failing function of the kidney. It is to be regretted that the patient did not remain under observation. These points, however, cannot be disputed : That he was utterly disabled by pronounced uræmia and albuminuric retinitis ; that he recovered from these so as to work steadily for a whole year. His work demanded precision and good sight, both of which he possessed during this period.

Dr. Wm. McLaury, who attended other members of the family, saw him during and after the illness.

Cases like this should give us confidence in the value of hydrotherapy in milder cases of Bright's disease.

In the Montefiore Home such cases are not infrequent. In the report for 1891 Drs. Ettinger and Rosenthal say : "Two cases of chronic Bright's disease owe marked improvement to the systematic application of hydrotherapy. Both had been treated for several months elsewhere without benefit. Both suffered from extensive dropsy of abdomen and legs. Eight quarts of fluid were removed from one of these on the day of admission, and the other had been repeatedly tapped. The dropsy has progressively disappeared, until now it is entirely gone in both cases."

CASE X.—SUBACUTE NEPHRITIS ; INTENSE CATARRHAL JAUNDICE.

Mrs. S. consulted me on June 29th,

1892, being pregnant eight months. Symptoms, and albumin and granular casts in urine, indicated nephritis of pregnancy. Two days later she was attacked by convulsions, during which she was delivered by forceps of a living child, which has continued to thrive. She remained comatose twenty-four hours, the urine being reduced to six ounces. Calomel, hot-blanket packs, and nitroglycerin "unlocked" the kidneys. The urine remained albuminous and scant for several weeks. Her recovery has been slow but steady under a non-meat diet, digitalis, nitroglycerin, etc. Urine was still albuminous when I was compelled to leave her on the 5th of September. She was now kindly cared for by Dr. A. H. Smith who sent her to me on the 26th of September with the following (here abbreviated) history:

"For some time after you left Mrs. S. did very well. The urine was abundant and the amount of albumin very small. I allowed her meat once a day. Appetite improved and kidneys remained satisfactory until her menstrual period, when there was an abrupt fall in the amount of the secretion to thirty ounces or less, with increase of albumin to five or six per cent. I then put her back on digitalis and added potassium acetate. This failed to increase the urine, and the hands and feet became a little swollen. I then ordered nitroglycerin, and in twenty-four hours the amount was doubled. The specific gravity kept about 1.015 to 1.020. Diet mostly milk. About a week ago, when the quantity of urine was smallest, she developed an intense itching of the surface without any eruption. Increase of urine was not followed by improvement in this respect.

"It appears to me to be a case well adapted for hydrotherapy, and I am glad she is under your observation for this reason especially. The itch-

ing is very distressing. Bicarbonate of soda has little effect. Hyoscyamine gave her sleep. I sincerely hope you will be able to do something for her relief," etc.

Having returned to the city on the 27th of September I found Mrs. S. in a most distressing condition from constant itching of the entire surface. Her eyes and skin had a yellowish tinge, bowels constipated, stools clay-colored, no appetite; urine thirty to thirty-six ounces daily by careful measurement, and decidedly albuminous. All sorts of local applications failed except a warm bran bath, whose success was temporary. She was now ordered a daily wet pack for three-fourths of an hour, sheet wrung out of water at 70° reduced daily 2°, followed by rapid ablution with water at 60° reduced daily 1°; also an enema of one and one-half quarts of water every day at 80° reduced daily 5° until 60° was reached; Carlsbad salts twice a week and a non-meat diet. She passed twelve ounces of urine during the first four hours after the first pack. It continued to increase daily until the quantity reached far beyond the normal. This treatment was continued until November 1st. The last albuminous urine (a trace) is recorded for October 11th, at which time a few granular casts were still present.

December 27th: Since that time eight specimens have been examined, all of which are entirely free from abnormal elements. Patient has gradually improved, with the exception of three days of intense colic, which I attributed to gall stones. These were carefully searched for and found on November 26th, since which time the pain ceased, the skin cleared up entirely.

For two weeks she had hot-air baths, followed by the rain bath at 95° reduced to 80° for twenty seconds, and the jet douche at 70°

for two seconds, with massage. This tonic procedure improved her appetite. She is now taking two ounces olive oil twice a day in sarsaparilla syrup, and is allowed white meat three times a week and beef once a week.

In this case the action of the wet pack as a stimulant to cutaneous action, which relieves the kidneys of work, was potent. Kussmaul, Friedrich Hoffman, and others have pointed out the superiority of the cold pack over the hot in subacute cases of nephritis. Krull's injections have so frequently proven themselves the most efficient remedial agents in catarrhal jaundice that the value of this hydriatic procedure need not here be dwelt upon. Dr. Smith's prediction that this case required hydrotherapy proved correct.

January 15th: Patient has been discharged for several weeks, with an allowance of meat every other day. She is perfectly well. Urine, examined to-day, is found normal.

CASE XI.—EPILEPSY.

A. F., age 15, was brought to the Hydriatic Institute July 19th, 1892, by his father, who says on the 31st of March, 1892, on the day of his daughter's burial, the boy fainted. Ten days later he fainted in school, and again two days later. Dr. S. P. Cahen was called and investigated the case at school, coming to the conclusion that it was a form of epilepsy. The boy was kept from school and put on bromide potassium. The attacks becoming more frequent, Dr. George W. Jacoby was called in consultation; the same treatment was continued. He continued to have attacks every day and very often twice a day, lasting from five to ten minutes. At first he lay unconscious, without any movement whatever; then the attacks became violent, frequently requiring several men to hold him down and prevent

him from doing himself bodily harm. Dr. Jacoby was again called in consultation and made an unfavorable prognosis—several neighboring physicians who had been called during the attacks gave him hypodermics of morphine. Patient also has received electrical treatment from Dr. Cahen.

Status præsens.—Face pale, covered with acne, eyes restless, hand tremulous, gait unsteady, appetite fair but capricious, gastric oppression after meals, bowels constipated. Patient appeared to be brominized.

Treatment.—Resorcin three grains in half a pint hot water, an hour before lunch and dinner. He was ordered to be at once well scrubbed with soap and water. This was followed by a wet pack, sheet wrung out of water at 70° reduced daily 2°, this to be followed by a rain bath at 90°, twenty-five pounds pressure, gradually reduced during thirty seconds to 75°.

August 20th: This treatment had been used daily, the temperature of the bath being reduced 2° every day. He had a slight attack five days after treatment was begun, none since. He was ordered to Long Branch to take surf baths.

September 29th: Patient has called on me several times, reporting steady improvement. He is discharged cured.

January 1st, 1893: Up to this writing no further attacks have appeared.

Besides these there were a number of cases of chronic rheumatism, neurasthenia, bronchitis, asthma, sciatica sent to the Institute for treatment by Drs. Starr, Dana, George W. Jacoby, Sachs, Leszynsky, Walton, Teschner, Pritchard, Willy Meyer, Allen, Schöney, Lincoln, Offenbach, Sayre, and others, the results of which will doubtless be reported by some of these gentlemen.

If the few clinical histories here offered will induce practitioners to utilize water more frequently as one

of their remedies, the writer will be content. In his propaganda of hydrotherapy he has, in some quarters, been charged with unwarranted enthusiasm. If a conscientious proving of all remedial agents in vogue and proposed during an active general practice of thirty years entitles a man to an opinion on therapeutics, I would reiterate with emphasis the conclusions given in Hare's "System of Practical Therapeutics." To sum up the aims, capabilities, and results of hydrotherapy, it may be said :

We possess in this method a valuable auxiliary to methodical treatment of many, *though not all*, acute and chronic maladies.

In many chronic diseases it has proved so successful after failure of medicinal remedies that no case

should be yielded up as hopeless until hydrotherapy in some form has been tried. My observations at the Montefiore Home, which receives only incurable cases, demonstrate this fact.

Domestic treatment will suffice in most cases, but if these fail a methodical treatment, under an expert hydrotherapist, may be of advantage to the patient.

The best consultants in Germany, Italy, and France, men like Leyden, Charcot, Nothnagel, and Erb, send their patients to these institutions with their diagnosis and general suggestions, rather than with specific directions. Finally, so much depends upon the reactive capacity of each individual that only systematic observation can determine the most useful procedure in each case.

PREMIUM.

IT is gratifying to us to be able by special arrangement to continue to offer as a Premium so important a work as

"The Uses of Water in Modern Medicine"

by **Dr. Simon Baruch.**

This is the only treatise on Scientific Hydrotherapy in the English language, and embodies the results of the author's vast experience, as well as the most recent investigations of European authorities.

A few extracts from reviews of leading Journals will show its value to every progressive practitioner.

After reading this admirable monograph, we are unable to comprehend why the remark should be persistently made, that "there is no modern treatise on hydrotherapy."—It is impossible, within the limits prescribed, for us to do justice to its many good points, so that we can only advise the profession to read and judge for themselves.—Vol. II., including ten chapters, is literally a small cyclopædia of usual information.—Passing over the descriptions of the douche and sitz bath, we come to the most elaborate chapter in the book, on "Hydrotherapy in Fevers," which should be read by every physician who wishes to keep abreast of modern therapeutics.—We cannot dwell upon the many excellent suggestions which meet the eye on every page.—We have reviewed only in the most superficial manner a work which possesses many inherent claims to the recognition of the profession, aside from the author's well known thorough acquaintance with the matters of which it treats. Unlike many medical works of greater pretension, it attracts by its literary style, which is at once forcible and elegant.—*Medical Record*, New York, February 18th, 1893.

Dr. Baruch has laid the medical profession in America under obligation, not alone for his persistent and well-directed advocacy of hydropathic measures in suitable cases of acute and chronic disease, but for gathering into a small compass, and presenting in a clear, accurate, and readable manner, the principal facts necessary for the understanding of hydrotherapy, and for its proper application in the art of medicine.—The object of the work, as stated in the preface, "to sever hydrotherapy from any connection with 'hydropathy' or 'water cure,'" is well carried out.—Water is not a panacea in the author's hands—it is one among many agents to be employed intelligently in suitable cases.—While we differ from the author on some minor points, we can cordially commend the book to the careful study of every practitioner.—*The American Journal of the Medical Sciences*, PHILADELPHIA, November 1892.

The praise we gave to the first volume of this first American original work on Hydrotherapy, must be bestowed in fuller measure to the second volume.—With the simple, yet clear powers of observation and presentation which characterize the author, he offers in a few chapters a complete description of the methods of using water.—Endowed with wide experience and an extensive knowledge of all German, English, and French publications, he is an excellent guide to the beginning hydrotherapist.—But even the more experienced will find an abundance of valuable hints, instructive observations and procedures deserving imitation. It would be a creditable undertaking to render into German this work, so brief and yet so rich in information.—*Blätter fuer klinische Hydrotherapie*, VIENNA, January, 1893.

In diseases of the nervous system we believe hydrotherapy has its most important field of usefulness, on account of the physiological action exercised by the water, and the author's indications for its employment seem to be well considered.—This work will be suggestive and useful to all who read it carefully and apply its teachings, and its incorporation of the latest facts on the subject of hydrotherapy will make it the standard work on that subject.—*New York Medical Journal*.

Subscribers to the JOURNAL OF BALNEOLOGY, which treats of the same subject, will receive the complete work, together with the JOURNAL for one year, for one dollar. They will thus be able to secure a complete library on Hydrotherapy at a minimum of cost.

Journal of Balneology Pub. Co., 26 Reade Street.

Subscription Order Blank.

Enclosed please find One Dollar, for which send me the JOURNAL OF BALNEOLOGY for one year.

Name.....

Address.....



